

AMENDMENTS TO THE CLAIMS

Claims:

1. (Cancelled)
2. (Cancelled)
3. (Cancelled)
4. (Cancelled)
5. (Cancelled)
6. (Cancelled)
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12. (Cancelled)
13. (Cancelled)
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15. (Cancelled)
16. (Cancelled)
17. (Cancelled)
18. (Cancelled)
19. (Cancelled)
20. (Cancelled)

21. (Currently Amended) A method of evaluating the needs of consumers through uniform assessments and analyses, the method comprising the steps of:

identifying a consumer's most serious problem by asking a first series of uniform questions;

initiating a triage process by asking a second series of uniform questions;

generating at least one intervention recommendation based upon the consumer's answers to the second series of uniform questions;

gathering a consumer self assessment from said consumer, wherein said consumer directly accesses the health care database to input answers to the first and second series of uniform question;

generating a consumer self assessment score;

scheduling appointments for the consumer to assess the severity of the consumer's problems to determine a treatment plan to complete the at least one intervention recommendation;

conducting professional assessment(s) to identify recommended treatment for the consumer;

asking the consumer a third series of questions, wherein said third series of questions are specific to the identified problems of the consumer;

determining an assessment score for the problems identified, by asking a third series of questions; and

generating an incremental record of activity that records the progress the consumer has made during the appointments;

wherein said assessment score takes into consideration a consumer self assessment score, a provider rating score, a standardized test score, a learning strategy score, and a score based on subjective assessor factors that influence training.

22. (Original) The method of claim 21, further comprising the step of assessing the quality assurance of the at least one interventions by asking the consumer a series of final uniform questions relating to the progress and satisfaction of the consumer.
23. (Original) The method of claim 22, wherein the consumer is visually impaired.

24. (Currently Amended) A method of evaluating the needs of consumers through uniform assessments and analyses, the method comprising the steps of:

logging into a health care database system by a service provider staff member;

meeting between the service provider staff member and a consumer;

determining if the consumer has previously been to the service provider;

reconciling said consumer's older records with newly collected information;

registering a consumer by asking a first uniform series of questions;

skipping unnecessary first uniform questions using a skip pattern that
skips later questions depending on prior answers;
saving answers to the first series of uniform questions into the health care
database;
identifying a consumer's most serious problem from the consumer's
answers to the first series of uniform questions;
identifying if the consumer is in a crisis from the consumer's answers to
the first series of uniform questions;
identifying if the consumer is in an urgent situation from the consumer's
answers to the first series of uniform questions;
initiating a triage process by asking a second series of uniform questions;
skipping unnecessary second uniform questions using a skip pattern that
skips later questions depending on prior answers;
saving answers to the second series of uniform questions into the health
care database;
generating at least one intervention recommendation from the health care
database based upon the consumer's answers to the second
uniform questions;
conducting professional assessment(s) to identify recommended treatment
for the consumer;
setting up an appointment with the consumer to assess the identified
problems of the consumer;

asking a third series of questions, saving answers to the third series of uniform questions into the health care database; determining an assessment score for the problems identified, by asking a third series of questions; scheduling appointments for the consumer to assess the severity of the consumer's problems to determine a treatment plan to complete the at least one intervention recommendation; generating an incremental record of activity recording the progress the consumer has made during the appointments; asking the consumer a final series of quality assurance questions relating to determine the consumer's satisfaction with the outcome of the treatment plan; and assessing the quality assurance of the at least one interventions treatment plans by asking the consumer a series of final uniform questions relating to the progress and satisfaction of the consumer.

25. (New) A method of generating a treatment plan for a consumer, implementing consistent protocols, the method comprising the steps of: accessing a health care database by a staff member of a service provider; meeting with a consumer; gathering a demographic data from said consumer during a uniform registration process; identifying one or more needs and one or more services the consumer

requires by asking a series of standardized services questions during the uniform registration process;

wherein said series of standardized services questions have one or more skip patterns that activate to skip one or more later standardized services questions, depending on one or more answers to one or more earlier standardized services questions;

wherein said demographic data and one or more answers to said series of standardized services questions of a returning consumer are saved and combined with a previously saved consumer information data set of said returning consumer in said health care database

wherein said demographic data and said one or more answers to said series of standardized services questions of a new consumer new is saved as a new consumer information data set;

asking said consumer a series of uniform triage questions related to a health of the consumer during a triage process;

wherein one or more answers to said series of uniform triage questions identifies one or more health related problems said consumer has, and wherein said one or more answers to said series of uniform triage questions identifies one or more functional problems said consumer has;

wherein said series of uniform triage questions have one or more skip patterns that activate to skip one or more later uniform triage

questions, depending on one or more answers to one or more earlier triage questions;

asking said consumer a series of uniform assessment questions that are related to said one or more health related problems and said one or more functional problems of said consumer, during an assessment process;

evaluating one or more answers to said series of uniform assessment questions to determine one or more intervention recommendations for each of the one or more health related problems and for each of the one or more functional problems of said consumer during said assessment process;

generating said one or more intervention recommendations during said assessment process;

wherein said assessment process also includes the steps of, identifying the effects of any field restrictions, identifying any concomitant medical conditions, asking said consumer to demonstrate one or more physical abilities related to said health related problems and said one or more functional problems, and identifying any medications said consumer is taking.

conducting one or more professional assessments to identify one or more treatment recommendations for the consumer;

determining one or more initial assessment scores for each of said one or

more health related problems and said one or more functional problems identified during said assessment process; wherein said one or more assessment scores, including said one or more initial assessment scores and one or more post assessment scores, are the average of the sum of: a consumer self assessment score; a provider rating score; a standardized test score; a learning strategy score; and a subjective assessor factors, that influence treatment, score; is converted to a one hundred point scale; formulating one or more treatment plans for said consumer that implements said one or more treatment recommendations; recording an incremental record of activity that identifies a progress said consumer makes in treating said one or more health related problems and said one or more functional problems.

26. (New) The method of claim 25, further comprising:
asking said consumer a series of uniform quality assurance questions that relate to a satisfaction of said consumer with an outcome of said one or more treatment plans;
determining if said consumer was satisfied with said outcome of said one or more treatment plans;
wherein said one or more answers to said series of uniform quality assurance questions are utilized to assess a quality and an effectiveness of said one or more treatment plans; and

27. (New) The method of claim 26, wherein said demographic data, said answers to said series of uniform triage questions, and said answers to said series of uniform assessment questions is collected by a staff member of a service provider and entered into said health care database; wherein said demographic data, said answers to said series of uniform triage questions, and said answers to said series of uniform assessment questions are directly entered into said health care database by said consumer; and wherein said consumer that enters said demographic data, said answers to said series of uniform triage questions, and said answers to said series of uniform assessment questions is blind or partially sighted.
28. (New) The method of claim 27, wherein said consumer self assessment score is a sum of a consumer's self ratings to each of said series of uniform triage questions and said series of uniform assessment questions; wherein said provider rating score is a sum of a provider's rating to a series of provider standardized questions; wherein said standardized test score is one or more results of one or more standardized tests; wherein said learning strategy score is a sum of a provider determined value in one or more learning strategy areas of visual, visual/tactual/auditory, tactual/auditory, visual/tactual, and tactual; and

wherein said subjective assessor factors, that influence treatment, score is determined by evaluating how one or more subjective assessor factors would influence treatment of said one or more health related problems and said one or more functional problems of the consumer.

29. (New) The method of claim 28, wherein said one or more health related problems are related to a vision impairment of said consumer.

30. (New) The method of claim 29, wherein said one or more functional problems are caused by said vision impairment of said consumer.

31. (New) The method of claim 30, further comprising:
determining whether said one or more answers to said series of uniform triage questions prompt one or more initial assessment recommendations from said health care database.

32. (New) The method of claim 31, further comprising:
asking said consumer to accept or reject said one or more initial assessment recommendations.

33. (New) The method of claim 32, wherein said one or more professional assessments take into consideration said one or more intervention recommendations.

34. (New) The method of claim 33, wherein said one or more assessment scores for each identified said one or more health related problems and said one or more functional problems are utilized to determine said one or

more treatment plans.

35. (New) The method of claim 34, where in said one or more treatment plans

address said one or more health related problems and said one or more functional problems and include one or more sets of goals to be achieved in a set time frame.

36. (New) The method of claim 35, wherein said one or more sets of goals are

selected from the group consisting of sighted guide, indoor travel, ability to use emergency exit, orientation skills, stair usage, and local travel.

37. (New) The method of claim 36, wherein said one or more initial

assessment scores determine a level of care associated with each of said one or more treatment plans.

38. (New) The method of claim 37, further comprising the steps of:

determining one or more post assessment scores; and
evaluating said progress of said consumer by comparing said one or more post assessment scores with said one or more initial assessment scores.

39. (New) The method of claim 38, wherein said incremental record of

activity comprises a progress report section, a goal information section, and an objective information section.

40. (New) The method of claim 39, wherein a data is collected from multiple

consumers to produce a cost/benefit analysis to determine if one or more treatments of consumer's problems reduce health care costs.

41. (New) The method of claim 40, wherein said one or more intervention recommendations are selected from the group consisting of psychotherapy, adjustment to vision losses, computer training, employment services, help with living independently, social service, help with improving orientation and mobility, and help with low or poor vision.

42. (New) The method of claim 41, further comprising:
determining if said consumer has previously received one or more past treatments from said service provider, and wherein the purpose of gathering said demographic data is to identify said consumer;

43. (New) The method of claim 42, further comprising the steps of:
scheduling an appointment to review said one or more health related problems of said consumer and said one or more functional problems of the consumer;
scheduling a triage appointment for the consumer during said uniform registration process; and
scheduling an appointment to begin said one or more treatment plans.

44. (New) The method of claim 43, further comprising the steps of:
saving said one or more answers to said series of uniform triage questions in said health care database;
saving said one or more answers to said series of uniform assessment questions in said health care database; and
saving said one or more initial assessment scores in said health care

database.

CONCLUSION

In reviewing the additions and changes to the claims and specification, please note that these are submitted for the purposes of clarity and completeness and not to add any new matter to the patent application. Applicant respectfully requests reconsideration of the patent application in light of the foregoing and requests that all of Applicant's pending claims be allowed. The Examiner is invited to contact Applicant's undersigned counsel by e-mail (Marc@HankinPatentLaw.com) or by telephone at (310) 892-1613 to expedite the prosecution of this case should there be any unresolved matters remaining.

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Respectfully Submitted,

/Marc E. Hankin/

Marc E. Hankin
Reg. No. 38908